



HEAD OFFICE:
 269 Braam Pretorius Str, Sinoville, 0182
 PO Box 954, Montana Park, 0159
 Citi Protection South Africa
 Reg: 2009/024088/07
 PSIRA: 2488579
 WEB: www.citiprotection.co.za
 TEL: 0860 100 202

PRIVATE & CONFIDENTIAL EMPLOYMENT APPLICATION

DEPARTMENT YOU WISH TO APPLY IN	SALES	ADMIN	ARMED RESPONSE	TECHNICAL	CONTROL CENTRE
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POSITION FOR WHICH YOU ARE APPLYING: _____

NAMES : _____ SURNAME: _____

IDENTITY NUMBER

PHYSICAL ADDRESS: _____

TELEPHONE NUMBERS: (H) _____ (W) _____ (CELL) _____

PSIRA REGISTRATION NO: _____

DRIVERS LICENCE CODE: _____ DATE OBTAINED : _____ EXPIRY DATE: _____

FIRE ARM COMPETENCY: CARD: YES | NO | RENEWAL DATE: / /

SCHOOLING

Name: _____ Town/Country: _____ Standard passed: _____

HIGHER EDUCATION

Institution	Courses passed	Date	Major Subjects

IF CURRENTLY STUDYING, state details

Institution	Courses	Subjects passed	Date completed

LANGUAGE PROFICIENCY

Language	Speak			Read			Write		
	good	average	poor	good	average	poor	good	average	poor
English	good	average	poor	good	average	poor	good	average	poor
Afrikaans	good	average	poor	good	average	poor	good	average	poor
Other:	good	average	poor	good	average	poor	good	average	poor

Registered as a security service provider by the Private Security industry Regulatory Authority,

EMPLOYMENT HISTORY

CURRENT EMPLOYMENT

Company Name: _____ Position: _____
Period of employment: Start: // _____ Co No: _____
Contact person: _____ Telephone No: _____
Reason for Applying for this position: _____

PREVIOUS EMPLOYMENT REFFERENCE

Company Name: _____ Position: _____
Period of employment: Start: / ___ / ___ End: / ___ / ___ Co No: _____
Contact person: _____ Telephone No: _____
Reason for leaving: _____

PREVIOUS EMPLOYMENT REFFERENCE

Company Name: _____ Position: _____
Period of employment: Start: / ___ / ___ End: / ___ / ___ Co No: _____
Contact person: _____ Telephone No: _____
Reason for leaving: _____

- May we approach your previous employers for comment?

Yes	No
-----	----
- May we approach your present employers for comment?

Yes	No
-----	----
- Do you have to give notice to your present employer?

Yes	No
-----	----
- Do you have any active interest in other businesses or organizations?

Yes	No
-----	----
- Have you or are you using any prohibited substance and or alcohol?

Yes	No
-----	----
- Have you caused a car accident?

Yes	No
-----	----

If yes to any questions, give full details_ _____

Salary expected per month: _____ When can you start? _____

Do any of your relatives work here?	Yes	No
Have you applied to this company before?	Yes	No

If yes, when and for what position?: _____

PLEASE ATTACH THE FOLLOWING:

- > Certified copies of:
 - ID document,
 - PSIRA Registration & Code 8 qualification certificate
 - Proof of residential address (lights and water account or affidavit)
 - 2 x Colour ID Photographs
 - Proof of Fire-Arm competency (Card)
 - Marriage certificate
 - UIF Contributors-card if applicable
 - Proof of ALL qualifications
 - Any applicable licence (e.g. driver's licence)
 - Registration certificates as requested by the employer.
 - IRP 2 tax form where applicable, Consent to polygraph
 - 2 x Latest pay-slip of current or previous employer attached.

I HEREBY IRREVOCABLY AUTHORIZE THAT IN THE EVENT OF ME UNDERGOING PRE-EMPLOYMENT TESTING:

- THE VETTING FEE OF R80.00 IS A NON-REFUNDABLE FEE AND DOES NOT GUARENTEE MY EMPLOYMENT.
- THE POLYGRAPH & CREDIT CHEQUE & SHOOTING FEE IS A NON-REFUNDABLE FEE AND DOES NOT GUARENTEE MYEMPLOYMENT
- THE NON-REFUNDABLE DEPOSITS SUPRA WILL BE DEDUCTED FROM THE TOTAL FEE LEVIED AND IS REPAYABLE TO THE EMPLOYER.

LEVEL OF COMPETENCE, SKILLS AND EXPERIENCE:

1. The applicant by his signature hereto warrants that:

his level of competence, skills and experience is sufficient for the position he is applying for and does not require training and other assistance to meet the employers performance requirements and standards to which, He/she has acquainted himself/herself with including the nature of the job complexity, volume or ambit of the work to be mastered and the qualifications and experience required as well as the levels of stress which is inherent in the position as well as the extent to which it is required to take own initiative

The applicant by his signature confirms as follows:

- Failure to disclose and supply all information in this application for permanent employment could lead to non-employment. All particulars supplied in this application for permanent employment are true and correct and should any information be found to be incorrect I agree to summarily unpaid suspension and or summary dismissal.
- The application for permanent employment and all ancillary documents referred to were presented and fully explained to me and I was afforded the opportunity to ask questions:
- The application for permanent employment requirements and all ancillary documents referred to were presented and fully explained and entered into of his own volition;
- The application for permanent employment requirements and all ancillary documents referred to were presented and fully explained in a language that the applicant knows and understands..
- The applicant was afforded an opportunity to seek advice on the application for permanent employment requirements and all ancillary documents referred to.
- No other representations were made during the signing of this application for permanent employment and all ancillary documents referred to.
- I accept that this application for permanent employment and all ancillary documents referred to were presented and in no way creates an employee and employer relationship.

Signed on theof..... 20..... at

.....
Applicant Signature

.....
Applicant full names

.....
Date

Employer Representative name

date

On behalf of the EMPLOYER SIGNATURE

emp003

FOR ADMIN PURPOSES ONLY

REFERENCE 1

Date: _____ Company Name: _____

Contact Person: _____ Telephone Number: _____

Service Period: _____ Reason for leaving: _____

	Unacceptable	Poor	Average	Good	Excellent
Reliability					
Honesty					
Professionalism					
Competent					
Proactive					

Would you re-employ?: _____

Remarks: _____

Reference Done By: _____ Signature: _____

REFERENCE 2

Date: _____ Company Name: _____

Contact Person: _____ Telephone Number: _____

Service Period: _____ Reason for leaving: _____

	Unacceptable	Poor	Average	Good	Excellent
Reliability					
Honesty					
Professionalism					
Competent					
Proactive					

Would you re-employ?: _____

Remarks: _____

Reference Done By: _____ Signature: _____

REFERENCE 3

Date: _____ Company Name: _____

Contact Person: _____ Telephone Number: _____

Service Period: _____ Reason for leaving: _____

	Unacceptable	Poor	Average	Good	Excellent
Reliability					
Honesty					
Professionalism					
Competent					
Proactive					

Would you re-employ?: _____

Remarks: _____

Reference Done By: _____ Signature: _____

ATTRIBUTES	WEIGHT %	Actual Rating
Grooming		
Communication		
Job Related Experience		
Job History		
Computer Literacy		

1 = Unacceptable, 2 = Poor, 3 = Average, 4 = Good, 5 = Excellent

REMARKS: _____

DRIVING TEST DONE

1 = Unacceptable, 2 = Poor, 3 = Average, 4 = Good, 5 = Excellent

Description	Compliant	Non Compliant	Scoring
Pre-Check of vehicle	YES	NO	
Knowledge of road traffic signs	YES	NO	
General driving skills	YES	NO	
Adherence to road traffic rules	YES	NO	
TOTAL			

Manager by their signature hereto certifies that he personally checked and evaluated the driver and he is competent in all aspects of driving

RFM SIGNATURE: _____ DATE: _____

HR SIGNATURE: _____ DATE: _____

. FIRE-ARM EVALUATION FOR REACTION OFFICERS

1 = Unacceptable, 2 = Poor, 3 = Average, 4= Good, 5 = Excellent

Description	Compliant	Non Compliant	Scoring
Knows the prescriptions of the fire-arms control act	YES	NO	
Tested for the safe handling of fire-arm	YES	NO	
Knows legislation on the fire-arm register on receipt and handover	YES	NO	
Knows legislation on permits and validity	YES	NO	
		TOTAL	

Manager by their signature hereto certifies that he personally checked and evaluated the weapon handler and he confirms that he/she is competent in all aspects in the handling of a fire-arm

RFM SIGNATURE: _____ DATE: _____

HR SIGNATURE: _____ DATE: _____

ARMED RESPONSE EVALUATION

1 = Unacceptable, 2 = Poor, 3 = Average, 4= Good, 5 = Excellent

Description	Compliant	Non Compliant	Scoring
Knows the operation of the TOM TOM in vehicle	YES	NO	
Was tested for taking directions to a premises	YES	NO	
Knows the radio protocol of the company	YES	NO	
Knows how to tactically approach a clients premises on an activation	YES	NO	
Knows how to operate a lockbox/ sentry access system	YES	NO	
		TOTAL	

Manager by their signature hereto certifies that he personally checked and evaluated the weapon handler and he confirms that he/she is competent in all aspects in the handling of a fire-arm.

LISTNER EVALUATION FOR CONTROLROOM EVALUATION

1 = Unacceptable, 2 = Poor, 3 = Average, 4= Good, 5 = Excellent

Description	Compliant	Non Compliant	Scoring
Knows the effective operation of listener monitoring/dispatch	YES	NO	
Knows the radio protocol of the company	YES	NO	
Knows how to use the tracking system of the company	YES	NO	
Knows how to efficiently communicate with the clients and staff	YES	NO	
Knows how to efficiently handle conflict situations	YES	NO	
Has read and is able to work according to the company SOP	YES	NO	
		TOTAL	

Manager by their signature hereto certifies that he personally checked and evaluated the CONTROLROOM operator and he confirms that he/she is competent and proficient in all aspects.

Credit check done	YES	NO	Adverse Comment	YES	NO
Credit Bureau report attached	YES	NO	Interview questionnaire attached	YES	NO
Head of department Verification:	YES	NO	Head of department recommendation:	YES	NO
Human Recourses approval	YES	NO	Signature Human Recourses:		
Polygraph booked	YES	NO	Polygraph deposit received	YES	NO
Polygraph attached	YES	NO	Polygraph deposit receipt no		
Polygraph deposit banked					

Signature of H.O. D: _____ Signature: _____

Name of interviewer: _____ Signature: _____